



Cincinnati Recreation Commission

International Children's Games Athlete

Registration



(Please Print)

Name _____ DOB _____
Address _____ Phone _____
City _____ State _____ Zip _____ Alt. Phone _____
E-Mail _____ @ _____ Male _____ Female _____
Parent/Guardian _____ Cell Phone _____
How did you hear about this event? _____ school _____ athletic club _____ newspaper _____ other _____

I recognize that there are certain risks of physical injury as a result of my or my child's participation in this program. I agree to assume the full risk of any injuries, damages or loss which I may sustain as a result of participating in any and all activities connected with or associated with such program.

I agree to waive and relinquish all claims I may have, as a result of my participation or my child's participation in the program, against the City of Cincinnati and the Public Recreation Commission, and their agents, employees and volunteers.

I do hereby fully release and discharge the City of Cincinnati and the Public Recreation Commission, and their agents, employees and volunteers from any and all claims from injuries, damage or loss which I may have or which may accrue to me on account of my or my child's participation in the program.

I further agree to indemnify, defend and hold harmless the City of Cincinnati and the Public Recreation Commission, and their agents, employees and volunteers from any and all claims resulting from injuries, damages and losses sustained by myself or my child or arising out of, connected with, or in any way associated with the activities of the program.

I have read fully and fully understand this release form. Before registration in this program is valid, this release form must be signed by the participant and/or if under eighteen, the participant's parent or legal guardian.

Participant's Signature _____ Date _____

I hereby execute this waiver and release on behalf of the named minor, who is below the age of eighteen (18), and represent and warrant that I am a parent or guardian authorized to execute this waiver and release on behalf of such minor

Parent/Guardian Signature _____ Date _____

Please mail check and completed application to:

Cincinnati Recreation Commission, Athletic Division, 805 Central Ave. Suite 800, Cincinnati, OH 45202

Swimming Registration

Swimming timed trials are being held Saturday June 26th, 2004 at St. Xavier's Keating Natatorium, beginning at 12:00 noon.
All swimming registration forms must be received by June 15, 2004

(Choose 5 events)

____ 50 ____ 100 Freestyle ____ 50 ____ 100 Breaststroke ____ 50 ____ 100 Backstroke
____ 50 ____ 100 Butterfly ____ 200 Individual Medley ____ 400 Freestyle

Tennis Registration

The Tennis Open Draw is being held June 23rd 2004 at the Lindner Family Tennis Center at 7:00pm.
Tournaments will be scheduled between June 25-27th 2004 at Lunken Playfield starting daily at 9:30am
All tennis registration forms must be received by June 18, 2004

(Choose your event)

____ Male Draw ____ Female Draw

Track and Field Registration

The track qualifying meet will be held June 5, 2004 beginning at 9:00am at LaSalle High School.
All track and field registration forms must be received by May 24, 2004

(Choose 3 events maximum: 2 runs + 1 field OR 2 field + 1 run)

____ 100 m Dash ____ 300 m Dash ____ 800 m Run ____ 1500 m Run
____ Long Jump ____ High Jump ____ Shot Put

Office Use only - Deposit to Fund : 323 X 197 X 1000

Check # _____ Cash \$ _____ Visa/Mastercard _____